

L22000324966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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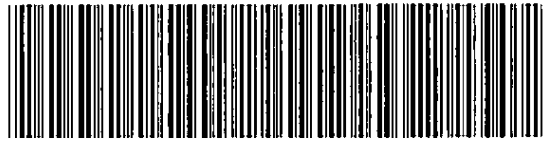
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Pilots Flight Academy, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rafael Garcia

Name of Person

Pilots Flight Academy, LLC

Firm/Company

3000 21st Street NW, Winter Haven Airport Bldg 60

Address

Winter Haven, Florida 33881-1205

City/State and Zip Code

mjeeruto@pilotsflightacademy.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Menlys Ceruto

407

501-1976

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FL
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Pilots Flight Academy, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/22/2022 and assigned
Florida document number L22000324966

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3000 21st Street NW

Winter Haven Airport Bldg 60

Winter Haven, Florida 33881-1205

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3000 21st Street NW

Winter Haven Airport Bldg 60

Winter Haven, Florida 33881-1205

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TALLAHASSEE, FL

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

3000 21st Street NW, Winter Haven Airport Bldg 60

Enter Florida street address

Winter Haven

City

Florida 33881-1205

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Rafael Garcia	3000 21st St NW	<input type="checkbox"/> Add
		Winter Haven Airport Bldg 60	<input type="checkbox"/> Remove
		Winter Haven, Florida 33881-1205	<input checked="" type="checkbox"/> Change
AMBR	Jorge Ceruto	3000 21st St NW	<input checked="" type="checkbox"/> Add
		Winter Haven Airport Bldg 60	<input type="checkbox"/> Remove
		Winter Haven, Florida 33881-1205	<input type="checkbox"/> Change
AMBR	Manuel Ceruto	3000 21st St NW	<input checked="" type="checkbox"/> Add
		Winter Haven Airport Bldg 60	<input type="checkbox"/> Remove
		Winter Haven, Florida 33881-1205	<input type="checkbox"/> Change
AMBR	Menlys Ceruto	3000 21st St NW	<input checked="" type="checkbox"/> Add
		Winter Haven Airport Bldg 60	<input type="checkbox"/> Remove
		Winter Haven, Florida 33881-1205	<input type="checkbox"/> Change
AMBR	Ivette Ramirez	1582 Skyline Dr	<input type="checkbox"/> Add
		Kissimmee, Florida 34744	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, leaving small margins at the top and bottom. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated March 29 2023

Alvin Kent -

Signature of a member or authorized representative of a member

Menlys Ceruto

Typed or printed name of signee

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